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1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE : 238681 AUTHORIZATION : COST LIMIT : ORDER DATE : June 1, 2018 ORDER TIME : 10:58 AM ORDER NO. : 238681-010 CUSTOMER NO: 5011226 DOMESTIC FILING NAME: DEVELOPMENTAL SERVICES, INC. EFFECTIVE DATE: \_ ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_\_\_ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Roxanne Turner - EXT.

EXAMINER'S INITIALS:

CORPORATION SERVICE COMPANY

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I Name

The name of this Limited Liability Company is:

Developmental Services, LLC

#### ARTICLE II Address

The initial mailing address and street address of the principal office of this Limited Embility Company is:

1890 State Road 436, Suite 300 Winter Park, FL 32792

## ARTICLE III Management

This Limited Liability Company is to be managed by one or more managers and is, therefore, a "manager-managed" limited liability company.

#### ARTICLE IV Initial Board of Managers

This Limited Liability Company shall have one (1) manager initially. The number of managers may be either increased or decreased from time to time in accordance with the Operating Agreement of this Limited Liability Company, but shall never be less than one.

The name and address of the initial manager of this Limited Liability Company is as follows:

Name Street Address

Kenneth H. Schultz. 1890 State Road 436, Suite 300

Winter Park, Florida 32792

### ARTICLE V Registered Agent, Registered Office & Registered Agent's Signature

The name and the Florida street address of the initial Registered Agent of this Limited Liability Company is:

Kenneth H. Schultz 1890 State Road 436, Suite 300 Winter Park, Florida 32792

Having been named as registered agent to accept service of process for this limited liability company at the place so designated in these Articles of Organization, I hereby accept this appointment and agree to serve this Limited Liability Company in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performs of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

REGISTERED AGENT'S SIGNATURE

AUTHORIZED REPRESENTATIVE'S SIGNATURE

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.)

<u>KENNETH H. SCHULTZ, AUTHORIZED REPRESENTATIVE</u>
Type or printed name of signee